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to the original components of LB 1084. So this has been a work in progress, and we believe that what we have presented before you is something that is a fair balance. Nebraska is one of two states that does not have a Medicaid Fraud Control Unit. Under federal law, you have two options. One is you can create a unit, such as what 48 other states and the District of Columbia have done, to ensure that the appropriate care has been given to those individuals who are recipients of Medicaid, as well as ensuring that those who are providing the services are doing it in a way that is according to the rules and not in a way that is intending to defraud the system. Nebraska is one of two states that does not have a unit. We have a waiver. At one time, the state of Nebraska had such a unit but, through the course of history, we cannot determine why the unit went away. Part of the provision of LB 1084 is a change, or improvement, in my opinion, of the existing False Claims Act. That is one-half of what we're proposing in LB 1084. The second half is the actual Fraud Control Unit. As we look through what other states have accomplished or what other states are doing in regards to this area, the cost of the unit is actually far...the cost is covered by the amount recovered from the fraud that is determined throughout the states, and mainly those states that have surrounded us. So I will go through briefly and talk about what the provisions are of LB 1084, what the intent is. The committee amendment that will follow strikes the original sections of LB 1084. LB 1084 does create the State Medicaid Fraud Control Unit. These units investigate and prosecute Medicaid provider fraud, patient abuse and neglect. One of the things that I think is important to mention as a part of this is, in addition to the idea that we need to be sure of where our money is being spent in this area, we also need to make sure that there is a remedy or there is an opportunity for those patients, who feel that there is abuse or neglect being committed against them in the system, to have an opportunity for an investigation and potential remedy created from that. So that is part of that, in addition to the other things that I have outlined. Federal law requires each state to have this unit unless there is a waiver, which I mentioned earlier. And again, Nebraska is only one of two states that do not have such a waiver. The federal law governing this area requires that the unit that is being created be separate from the Medicaid agency,